

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Mchael D. ANDERSON, et al
Title: FLEXIBLE TRUCK BED TIE-DOWN
SYSTEM
Appl. No.: Unassigned
Filing Date: June 7, 2001
Examiner: Unassigned
Art Unit: Unassigned

UTILITY PATENT APPLICATION
TRANSMITTAL

Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Michael D. ANDERSON
Diane T. ALLEN
Stephen D. BALL

☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract (22 pages).
- ☒ Formal drawings (16 sheets, Figures 1-34).
- ☒ Declaration and Power of Attorney (4 pages).
- ☒ Assignment of the invention to Nissan Design America, Inc..
- ☒ Assignment Recordation Cover Sheet.
- ☒ Information Disclosure Statement.
- ☒ Form PTO-1449 with copies of 52 listed reference(s).

The filing fee is calculated below:

| | Claims as Filed | Included in Basic Fee | Extra Claims | Rate | Fee Totals |
|--|--------------------|--------------------------|-----------------|-------------------|---------------|
| Basic Fee | | | | \$710.00 | \$710.00 |
| Total Claims: | 29 | - 20 | = 9 | x \$18.00 | = \$162.00 |
| Independents: | 1 | - 3 | = 0 | x \$80.00 | = \$0.00 |
| If any Multiple Dependent Claim(s) present: | | | + | \$270.00 | = \$0.00 |
| | | | | SUBTOTAL: | = \$872.00 |
| [] Small Entity Fees Apply (subtract ½ of above): | | | | | = \$0.00 |
| | | | | TOTAL FILING FEE: | = \$872.00 |
| Assignment Recordation Fee: | | | + | \$40.00 | = \$40.00 |
| | | | | TOTAL FEE | = \$912.00 |

- [X] A check in the amount of \$912.00 to cover the filing fee and fee for recordation of Assignment is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

By 

Date June 7, 2001

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